ENTRY BLA	NK	
PLEASE TYPE	OR PRINT	Entered previous May Show
		✓ yes □ no
☐ Ms.	NEIL	CARROLL
Mr. Artist_	100.2	(Last Name Last)
Permanent /	310 TOX	EDO PARMA, O
S	treet	City
44134	Tel. (216	. 741.1882
Zip	Area Code	
Temporary or Studio Address	1/2/1 / Street	HESSER #10 CLEVE
44106	Tel. (216	-791-8541
Zip	Area Code	
		ne of the counties of the were you born in?
Collaborator _	(If Any)	
	ntries are not accep	
	ould dispose of.	
☐ Museum sh	ould ship to artist	t C.O.D. at this address:
Cassial Instance	tions	
Special Instructure When necessary		structions or a drawing of how
	be assembled and	

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 13, 1979.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature /

ENTRY BLANKS □ 1. Paintings □ 2. Graphics □ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts SPRAY ENAMEZ / PASTEL Materials Title INE BEEN HERE POR DAYS " Price or NFS Insurance Value if NFS Only 20" x 26 GRAPHICS AND PHOTOGRAPHY ONLY Additional No. Total No. in Edition Price Price of For Sale Unframed Frame ACCEPTED DO NOT WRITE IN THIS SECTION 120(1 REJECTED REJECTED ✓ 1. Paintings □ 2. Graphics □ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts SPRAY ENAMEL /F. Title #150 92 Insurance Value of NFS Only Price or NFS Insurance Value 20"x 26" GRAPHICS AND PHOTOGRAPHY ONLY Additional No. For Sale | Total No. in Edition Price of Unframed Frame RECEIVED DO NOT WRITE IN ACCEPTED THIS SECTION

DATE

REJECTED